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OTICE OF APPEAL FROM THE EXAMINER TO THE BOARD OF PATENT APPEALS AND INTERFERENCES

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In Re Ap	olication of <u>Axel Herbst</u>	_ Attorney Docket No.:	6570.P057						
Application	on Number <u>10/712,472</u>								
Filed _	November 12, 2003								
For <u>Eff</u>	icient Deletion Of Archived Data								
Group A	t Unit: 2167 Examiner: _	Susan F. Rayyan							
Address to	:								
P.O. Box	SIONER FOR PATENTS 1450 ia, Virginia 22313-1450								
Applican	hereby appeals to the Board of Patent A	ppeals and Interferences from th	ne last decision of the examiner.						
The fee f	or this Notice of Appeal is (37 CFR 1.17(b))	\$ <u>510.00</u> .						
[]	Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is:								
[X]	A check in the amount of the fee is enclosed.								
[]	Payment by credit card. Form PTO-2038 is attached.								
[]	The Commissioner has already been authorized to charge fees in this application to a Deposit Account. I have enclosed a duplicate copy of this sheet.								
[X]	The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. <u>02-2666</u> . I have enclosed a duplicate copy of this sheet.								
[]	A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed.								
٠	Warning: Information on this form manot be included on this form. Provide								
I am the									
Tam the	[] applicant/inventor.		Signature						
	assignee of record of the entire in See 37 CFR 3.71, Statement und is enclosed. (Form PTO/SB/96)		Olgitatato						
	[] attorney or agent of record.	Robert B. O'Rourke Typed or printed name							
	[X] attorney or agent acting under 37 Registration number if acting un								
		(Reg. No	o.) Date						
	signatures of all the inventors or assignees pultiple forms if more than one signature is		of their representative(s) are required.						
[] *	Total of forms are submitted								
as first cl	certify that this correspondence is being deass mail in an envelope addressed to: Co	eposited with the United States I mmissioner for Patents, P.O. Bo Janece Sh	ox 1450, Alexandria, VA 22313-1450 💍						
on	Date		printed name						
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MARK	0014	Application No.	10/712,472				
TRANSMITTAL F	ORM	Filing Date	November 12, 2004				
(to be used for all correspondence after	er initial filing)	First Named Inventor	Axel Herbst				
		Art Unit	2167				
		Examiner Name	Rayyan, Susan F.				
Total Number of Pages in This Submission	n 7	Attorney Docket Number	6570P057				
ENCLO	SURES (chec	k all that apply)					
Fee Transmittal Form	Drawing(s))	After Allowance Communication to TC				
Fee Attached	Licensing-related Papers		Appeal Communication to Boa of Appeals and Interferences				
Amendment / Reply	Petition		Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) Proprietary Information Status Letter Other Enclosure(s) (please identify below): Return Postcard				
After Final Affidavits/declaration(s)	Petition to Provisional	Convert a I Application					
Extension of Time Request	Power of A Change of	Attorney, Revocation Correspondence Address					
Express Abandonment Request	Terminal C	Disclaimer					
Information Disclosure Statement	Request for Refund CD, Number of CD(s)		Client Postcard				
PTO/SB/08							
Certified Copy of Priority Document(s)	Lands	cape Table on CD					
Response to Missing Parts/ Incomplete Application Basic Filing Fee Declaration/POA Response to Missing Parts under 37 CFR 1.52 or 1.53	Remarks		1				
SIGNATUR	E OF APPLICAI	NT, ATTORNEY, OR AG	SENT				
Robert B. O'Rourke, Reg. No. 46,972 Individual name BLAKELY, SOKOLOFF, TAYLOR & ZAFMAN LLP							
Date 3 13 0							
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Date

Janece Shannon

Typed or printed name

Signature

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<u> </u>	Complete if Known											
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	Examiner Name		Rayyan,									
Applicant clair	ms small entity	status. See 37 CFF	< 1.27.	Art Unit		2167	ousan I'.					
TOTAL AMOU	NT OF PAYME	NT (\$)	510.00	Attorney Docket N	lo.	6570P057						
METHOD OF	PAYMENT (check all that app	ıly)									
Check Credit card Money Order None Other (please identify):												
Deposit Account Deposit Account Number: <u>02-2666</u> Deposit Account Name: <u>Blakely, Sokoloff, Taylor & Zafman LLP</u> For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)												
		•	e Director is h	· —			appiy)					
☐ Charge fee(s) indicated below ☐ Credit any overpayments ☐ Charge fee(s) indicated below, except for the filing fee ☒ Any concurrent or future reply that requires a petition for												
☐ Charge	fee(s) indicate	ed below, except t	for the filing f									
Charge:	any additiona	l fee(s) or underp	ayment of fee	(5)				incorporating an				
during the pendency of this application. appropriate petition for extension of time and all required												
	· ·	• •	_	fees sho	ould be	charged.						
FEE CALCULAT	ION	· · · · · · · · · · · · · · · · · · ·										
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Total Claims		Zaims below	Fee Paid									
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Claims	1 5 =	0 x 210.00	\$0.00									
Multiple Dependent		=	=									
Large Entity Small Entity												
	Fee Fee <u>FeeDi</u> code (\$)	escription										
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	204 405 **Reis	ole Dependent claim, if not ssue independent claims o	over original patent	**or	number or	eviously paid. if i	greater, For Reiss	ues, see below				
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2. ADDITION Large Entity	VAL FEES Small Entity		· · · · · · · · · · · · · · · · · · ·									
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Code (\$)	Code (\$)	Fee Descr	•			Fe	e Paid					
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1460 130 1807 50		titions to the Commissione ocessing fee under 37 CFF										
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1809 810		ng a submission after final										
1810 810		r each additional invention	to be examined (37	CFR § 1.129(b))								
Other fee (specify) SUBTOTAL (2) (\$) 510.00												
					L		10.00					
SUBMITTED BY Complete (if applicable)												
Name (Print/Type)	Robert B. O	Rourke		Registration No. (Attorney/Agent)	46,9	72	Telephone	(408) 720-8300				
Signature					-		Date	3/13/08				